

**APPLICATION FOR CERTIFICATE TO BECOME A  
TELECOMMUNICATIONS CARRIER**

**AREOCOM, LLC**

**EXHIBIT B**

**CORPORATE DOCUMENTS**

Form **LLC-45.5**

January 1999

Jesse White  
 Secretary of State  
 Department of Business Services  
 Limited Liability Company Division  
 Room 369, Howett Building  
 Springfield, IL 62756  
<http://www.sos.state.il.us>

Payment must be made by certified check, cashier's check, Illinois attorney's C.P.A.'s check or money order, payable to "Secretary of State."

# Illinois Limited Liability Company Act

## Application for Admission to Transact Business

**[Redacted]**  
 Must be typewritten

*(This space for use by Secretary of State)*

Date: June 23, 2003

Assigned File #

Filing Fee

Penalty

Approved:

\$000  
0094-672-9

This space for use by  
 Secretary of State

**FILED**

**JUN 23 2003**

LIMITED LIABILITY CO. DIV.  
 JESSE WHITE  
 SECRETARY OF STATE

1. Limited Liability Company name: Areocom, LLC.

*(Must comply with Section 1-10 of ILLCA or article 2 below applies.)*

2. The assumed name, other than the true company name, under which the LLC proposes to transact business in Illinois is: \_\_\_\_\_

*(If applicable, a form LLC-1.20, Application to Adopt an Assumed Name, is required to be completed and attached to this application.)*

3. Federal Employer Identification Number (F.E.I.N.): 37-1467343

4. Jurisdiction of Organization: Missouri

5. Date of Organization: 5/14/2003

6. Period of Duration: December 31, 2060

*(See #14 on back)*

7. The address, including county, of the office required to be maintained in the jurisdiction of its organization, or if not required, of the principal place of business (Post office box alone and c/o are unacceptable):

c/o Jason N. Shaffer, Attorney At Law 1021 E. Walnut

*(Number)*

*(Street)*

*(Suite)*

Springfield, MO 65802

*(City/State)*

*(ZIP Code)*

Greene

*(County)*

8. Registered agent: National Registered Agents, Inc.

*(First Name)*

*(Middle Name)*

*(Last Name)*

Registered Office: 208 South LaSalle Street, Suite 1855

*(Number)*

*(Street)*

*(Suite #)*

(P.O. Box or c/o Chicago, County of Cook

*(City)*

*(County)*

Illinois 60604

*(ZIP Code)*

9. The date on which this foreign LLC first did business in Illinois: upon filing

**LLC-45.5**

10. The purpose or purposes for which the company is organized and proposes to conduct in this State: Include the business code # (IRS Form 1065).

Telecommunication services

11. The limited liability company is managed by:

☒ manager(s)

☐ vested in member(s)

12. The Illinois Secretary of State is hereby appointed the agent of the limited liability company for service of process under the circumstances set forth in a subsection (b) of Section 1-50 of the ILLCA.

13. This application is accompanied by a certificate of good standing or existence, as well as a copy of the articles of organization, as amended, duly authenticated within the last thirty (30) days, by the officer of the state or country wherein the LLC is formed.

14. If the period of duration is a date certain and is not stated in the Articles of Organization from the domestic state, a copy of that page from the Operating Agreement stating the date must also be submitted.

15. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application for admission to transact business is to the best of my knowledge and belief, true, correct and complete.

Dated 6-13, 2003.  
(Month/Day) (Year)

James J. Morris  
(Signature)

(Signature must comply with Section 5-45 of ILLCA)

James J. Morris, Manager

(Type or print name and title)

(If applicant is a company or other entity, state name of company and indicate whether it is a member or manager of the LLC.)

\*Please refer to Sections 178.20(d) and (e) of the Administrative Rules

LLD-17A